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PTO/SB/82 (04-05)
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Application Number	09/778, 108
Filing Date	02/07/2001
First Named Inventor	ADRON Demello
Art Unit	2141
Examiner Name	NOUYEN, QUANG
Attorney Docket Number	

A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with Customer Number: OR Firm or Individual Name PROFILIOM	l hereby revok	I hereby revoke all previous powers of attorney given in the above-identified application.								
I hereby appoint the practitioners associated with the Customer Number:										
The address associated with Customer Number: OR Firm or Individual Name PROFILIUM Address ISD NOTRE - Dome & Sast City Montreal Country Canada Telephone 514 815 5017 Email Miller@Profilium. Com I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Alexander Miller Date July 13, 2005 Telephone										
Firm or Individual Name PROFILIUM Address ISA NOTRE - DOME GOST MONTREAL State Zip HAY3P6 Country Canada Telephone 514 815 5017 Email Miller@Profilium. Com I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Hall Name Alexander Miller Date July 13, 2005 Telephone 514 815 5017 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	The	address	associated with	e above	identified application to:					
Individual Name										
City MonTreal State Zip H1Y3P6 Country Canada Telephone 514 815 5017 Email Miller@Profilium. Com I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Haller Name Alexander Miller Date Juy 13, 2005 Telephone SU 8155017 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Individual	X Individual Name FKO+(C(VM)								
Country Canada Telephone 514 815 5017 Email Miller@Profilium. Com I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Alexander Miller Date July 13, 2005 Telephone SIGNATURE of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Address									
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signature is required, see below*.	ling i i saat a da									

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending unter individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.